

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

MAY 24 2004

**Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

23416 7590 03/19/2004

**CONNOLLY BOVE LODGE & HUTZ, LLP
P O BOX 2207
WILMINGTON, DE 19899**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

| | |
|----------------------|--------------------|
| J. LYNN FERRY | (Depositor's name) |
| <i>J. Lynn Ferry</i> | (Signature) |
| <i>May 19, 2004</i> | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/612,560 | 07/02/2003 | Ralf Weimann | 07244-00140-US | 4511 |

TITLE OF INVENTION: COLOUR PHOTOGRAPHIC SILVER HALIDE MATERIAL

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 06/21/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|---------------------|----------|----------------|
| LETSCHER, GERALDINE | 1752 | 430-553000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Connolly Bove Lodge & Hutz LLP
2.
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) AGFA-GEVAERT

(B) Belgium

COUNTRY

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee
 Advance Order - # of Copies _____

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-2775 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Connolly & Bove (Date) 5/19/04

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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05/25/2004 SZEWDIE2 00000098 10612560

01 FC:1501 1330.00 DP
02 FC:1504 300.00 DP

TRANSMIT THIS FORM WITH FEE(S)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,630.00)

| Complete if Known | |
|----------------------|-----------------------|
| Application Number | 10/612560-Conf. #4511 |
| Filing Date | July 2, 2003 |
| First Named Inventor | Ralf Weimann |
| Examiner Name | G. Letscher |
| Art Unit | 1752 |
| Attorney Docket No. | 07244-00140-US |

METHOD OF PAYMENT (check all that apply)

Check CREDIT CARD MONEY ORDER OTHE NONE

Deposit Account:

Deposit Account Number 03-2775

Deposit Account Name Connolly Bove Lodge & Hutz LLP

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
- Charge any additional fee(s) or any underpayment of fee(s)
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------------------|---------------|------------------------|----------|
| Fee Code (\$) | Fee Code (\$) | | |
| 1001 770 | 2001 385 | Utility filing fee | |
| 1002 340 | 2002 170 | Design filing fee | |
| 1003 530 | 2003 265 | Plant filing fee | |
| 1004 770 | 2004 385 | Reissue filing fee | |
| 1005 160 | 2005 80 | Provisional filing fee | |
| SUBTOTAL (1) (\$) | | 0.00 | |

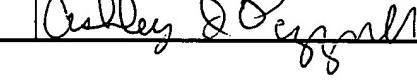
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Extra Claims | Fee from below | Fee Paid |
|----------------------|--|----------|
| Total Claims 16 | -20** = <input type="text"/> x <input type="text"/> = <input type="text"/> | 0.00 |
| Independent Claims 1 | -3** = <input type="text"/> x <input type="text"/> = <input type="text"/> | 0.00 |
| Multiple Dependent | | |

| Large Entity | Small Entity | Fee Description |
|--------------------------|---------------|--|
| Fee Code (\$) | Fee Code (\$) | |
| 1202 18 | 2202 9 | Claims in excess of 20 |
| 1201 86 | 2201 43 | Independent claims in excess of 3 |
| 1203 290 | 2203 145 | Multiple dependent claim, if not paid |
| 1204 86 | 2204 43 | ** Reissue independent claims over original patent |
| 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) (\$) | | 0.00 |

**or number previously paid, if greater; For Reissues, see above

| 3. ADDITIONAL FEES | |
|-----------------------------------|---------------|
| Large Entity | Small Entity |
| Fee Code (\$) | Fee Code (\$) |
| 1051 130 | 2051 65 |
| 1052 50 | 2052 25 |
| 1053 130 | 1053 130 |
| 1812 2,520 | 1812 2,520 |
| 1804 920* | 1804 920* |
| 1805 1,840* | 1805 1,840* |
| 1251 110 | 2251 55 |
| 1252 420 | 2252 210 |
| 1253 950 | 2253 475 |
| 1254 1,480 | 2254 740 |
| 1255 2,010 | 2255 1,005 |
| 1401 330 | 2401 165 |
| 1402 330 | 2402 165 |
| 1403 290 | 2403 145 |
| 1451 1,510 | 1451 1,510 |
| 1452 110 | 2452 55 |
| 1453 1,330 | 2453 665 |
| 1501 1,330 | 2501 665 |
| 1502 480 | 2502 240 |
| 1503 640 | 2503 320 |
| 1460 130 | 1460 130 |
| 1807 50 | 1807 50 |
| 1806 180 | 1806 180 |
| 8021 40 | 8021 40 |
| 1809 770 | 2809 385 |
| 1810 770 | 2810 385 |
| 1801 770 | 2801 385 |
| 1802 900 | 1802 900 |
| Other fee (specify) | 1504 |
| SUBTOTAL (3) (\$) | |
| *Reduced by Basic Filing Fee Paid | |
| SUBTOTAL (3) (\$) | |
| 1,630.00 | |

| SUBMITTED BY | | (Complete if applicable) | |
|-------------------|---|-----------------------------------|---------|
| Name (Print/Type) | Ashley I. Pezzner | Registration No. (Attorney/Agent) | 35,646 |
| Signature |  | Date | 5/19/04 |



PTO/SB/92 (05-03)

Approved for use through 4/30/2003. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/612560

Attorney Docket No.: 07244-00140-US

Certificate of Mailing Under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on May 19, 2004
Date

J. Lynn Ferry
Signature

J. Lynn Ferry

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal Letter
Form PTOL-85 PART B
Fee Address Indication Form
Fee Transmittal
Check in the amount of \$1,630.00



Application No.: 10/612560

Docket No.: 07244-00140-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Ralf Weimann et al.

Application No.: 10/612560

Group Art Unit: 1752

Filed: July 2, 2003

Examiner: G. Letscher

For: COLOUR PHOTOGRAPHIC SILVER HALIDE
MATERIAL

TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

1. Form PTOL-85 PART B;
2. Fee Address Indication Form; and
3. Fee Transmittal.

Our check in the amount of \$1,630.00 covering the required fees is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 03-2775, under Order No. 07244-00140-US.

Respectfully submitted,

By Ashley I. Pezzner
Ashley I. Pezzner

Registration No.: 35,646
CONNOLLY BOVE LODGE & HUTZ LLP
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